

CLAIMS ONLY							Application Number 09/648044		Filing Date	
							Applicant(s)			
							* May be used for additional claims or amendments			
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT					
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	/						51			
2		/					52			
3		/					53			
4		/					54			
5		/					55			
6		/					56			
7		/					57			
8		/					58			
9		/					59			
10		/					60			
11		/					61			
12	/						62			
13		/					63			
14		/					64			
15		/					65			
16		/					66			
17		/					67			
18		/					68			
19		/					69			
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23		/					73			
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26		/					76			
27		/					77			
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35		/					85			
36		/					86			
37		/					87			
38		/					88			
39		/					89			
40		/					90			
41		/					91			
42		/					92			
43		/					93			
44		/					94			
45		/					95			
46		/					96			
47	/						97			
48		/					98			
49		/					99			
50		/					100			
Total Indep	4						Total Indep			
Total Depend	116						Total Depend	7		
Total Claims	120						Total Claims			

7
 27